Indiana State Police Methamphetamine Laboratory Occurrence Report This form complies with the statutory requirement set forth in IC 5-2-15-3.

| Date: | 03/01/2010 | Address: | 700 St Mary Ave |
|--|--|---|---|
| Case #: | <u>14F39719</u> | | 221-C Turtle Crk Apartmen |
| County: | Clinton | | Frankfort, IN |
| Type of La | aboratory Seizure (check one) | Seizure Location (| check all that apply) |
| ☑ Operational Lab☐ Chemical/Glassware/Equipment (only)☐ Dumpsite (only) | | ☐ Residence☐ Outbuilding☐ Vehicle | ☐ Hotel/Motel ☐ Open – No Structure ☐ Other: Apartment complex |
| Items Found: Location (bedroom, kitchen, open air, etc) (check all that apply) ✓ Lithium/Ammonia Reaction(s): One pot method | | | |
| Red Phosphorous/Iodine Reaction(s): | | | |
| Flammable Solvents: Starting Fluid | | | |
| | | | |
| Anhydrous Ammonia: | | | |
| Hydrochloric Acid Gas Generator(s): | | | |
| Corrosive Acid: <u>Drain cleaner</u> | | | |
| Corrosive Base: | | | |
| Other (i | tem and location): | | |
| ☐ Yes _ ⊠ No | er age 18 discovered (check one) (number present) eport to Child Protective Services | Ephedrin | <u>e Information</u> e/Pseudoephedrine Tracking Log erchant Tip |
| This report is to be faxed to the following agencies that serve the location: | | | |
| Fire Depart | tment: Frankfort FD | Fax: 765-654-4739 | |
| Health Department: Clinton County HD | | Fax: <u>765-659-6387</u> Fax: | |
| Child Protection Service: Clinton county CPS | | | |
| For further information regarding this methamphetamine laboratory, contact Investigating Officer: <u>Timothy L. Kendall</u> Phone <u>765-567-2125</u> | | | |

This form is to be faxed to the Fire Department, Health Department and/or Child Protective Services Department listed within 24 hours of scene processing.

This form is to be included with the case file, and a copy sent to the Clandestine Laboratory Team Leader for retention.